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Docket No.: M4065.0196/P196
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Shane P. Leiphart

Application No.: 09/371,955

Filed: August 11, 1999

For: ENHANCED BARRIER LINER
FORMATION FOR VIAS

Group Art Unit: 2811

Examiner: D. Kang

4/2/01
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AMENDMENT

Box Non-Fee Amendment
Commissioner for Patents
Washington, DC 20231

Dear Sir:

In response to the Office Action dated January 2, 2001 (Paper No. 5), please amend the above-identified U.S. Patent application as follows:

In the Specification:

Please replace the Title on the cover page with:

ENHANCED BARRIER LINER FORMATION FOR VIAS

Please replace the third full paragraph on page 9 of the specification, beginning on line 19, with the following paragraph:

A1
FIG. 3 shows an enlarged view of a via fabricated according to a second embodiment of this invention. In this embodiment, the titanium aluminide 37 is formed in



AMENDMENT TRANSMITTAL LETTER				Docket No. M4065.0196/P196	
Application No. 09/371,955	Filing Date August 11, 1999	Examiner D. Kang	Group Art Unit 2811		
Applicant(s): Shane P. Leiphart					
Invention: ENHANCED BARRIER LINER FORMATION FOR VIAS					
TO THE COMMISSIONER FOR PATENTS Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims		- 20 =		x	
Independent Claims		- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input checked="" type="checkbox"/> No additional fee is required for this amendment. <input type="checkbox"/> Please charge Deposit Account No. <u>04-1073</u> in the amount of \$ _____. A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Thomas J. D'Amico Attorney Reg. 28,371				Dated: <u>March 30, 2001</u>	
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 828-2232					

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